DATENT ADD	LICATION EEE	DETERMINATION	

Effective October 1, 2000

Application or Docket Number

09733617

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE (			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		19					RATE FEE			RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 10 minus 20=			us 20=	. 0			X\$ 9=		OR	X\$18=	-	
INDEPENDENT CLAIMS			nus 3 =	3 = *			X40=		OR	X80=	80	
MULTIPLE DEPENDENT CLAIM PRESENT				, 🗆			+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THE			THAN		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	• •
AME	Independent	.*	Minus	***		=		X40=		OR	X80=	- 7
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			+135=		OR	+270=	
변경수 100 전에 가장 보다 보다. 19 1년 1일							TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	ımn 2)	(Column 3)		AUDII. FEE	<u> </u>	4	ADDIT: I EE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY ) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
	rinoi Prese	NTATION OF M	OLTIPLE DEF	ENDEN	TOLANI		J	+135=		OR	+270=	
X.	3.4							TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	IULTIPLE DEI	PENDEN	IT CLAIM		}	+135=		OR	+270=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												-
	If the "Highest Nu	mber Previously F Imber Previously F Inber Previously Pa	Paid For" IN TH	IS SPACE	is less th	an 3, enter "3."		ADDIT. FEE und in the ap	propriate bo	,	ADDIT. FEE olumn 1.	<u> </u>